STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	006341	A. BUILDING: _____ B. WING _____	10/07/2013

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEARTLAND HOME HEALTH CARE AND HOSPICE	1315 DIRECTORS ROW STE 210 FORT WAYNE, IN 46808

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 000	INITIAL COMMENTS This was a Hospice state licensure survey. Survey Dates: October 2-7, 2013. Facility Number: 006341 Medicaid Number: 200142900A Surveyor: Miriam Bennett, RN, BSN, PHNS Quality Review: Joyce Elder, MSN, BSN, RN October 9, 2013 This document was modified as the result of an IDR 11/25/13. je	S 000		
S 579	418.60(a) PREVENTION The hospice must follow accepted standards of practice to prevent the transmission of infections and communicable diseases, including the use of standard precautions. This STANDARD is not met as evidenced by: Based on observation, policy review, and interview, the hospice failed to ensure hospice aides (HA) followed infection control policies and procedures for 1 of 1 HA home visit observation with the potential to affect all the hospice's patients who receive HA services. (#1) Findings include 1. During home visit observation on 10/3/13 at 9:30 AM, employees C and D, both HAs, were observed providing a bed bath for patient #1.	S 579		

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S 579	Continued From page 1 A. At 10:15 AM, employee D washed the patient's perineal area, then removed gloves and donned new gloves but failed to perform hand hygiene with glove change. Employee D then placed soiled linens into bag and failed to change gloves or perform hand hygiene prior to returning to patient care. B. At 10:20 AM, employee D washed patient's bottom of bowel movement then changed gloves again and failed to perform hand hygiene with glove change and prior to returning to patient care which included applying lotion to the patient's back. C. At 10:30 AM, employee D removed gloves and donned new gloves and failed to perform hand hygiene with glove change and prior to obtaining a clean wash cloth and towel. Employee C washed right buttock of urine then changed gloves and failed to perform hand hygiene. D. At 10:35 AM, employee C removed gloves, failed to perform hand hygiene, then proceeded to place dirty towel in linen bag and put clean pillow case on pillow. Employee D removed gloves, failed to perform hand hygiene, and proceeded to comb patient's hair. 2. On 10/3/13 at 2:30 PM, employee Q indicated all employees should wash hands or use sanitizer after removing gloves and prior to donning new gloves. 3. The hospice's policy titled "Hand Hygiene Indications for Hand Hygiene," dated 2006-2013 states, "Guideline: ... Hand hygiene will be performed using an alcohol-based hand hygiene	S 579		

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S 579	Continued From page 2 product ... when the hands are not visibly soiled or with antimicrobial soap and water ...: ... H. After contact with body fluids or excretions, ... I. After removing gloves. ... Hand antisepsis should also be performed: A. When moving from a contaminated-body site (e.g., perineal area) to a clean-body site (e.g., patient's face) during patient care."	S 579		
S 615	418.76(c)(1) COMPETENCY EVALUATION An individual may furnish hospice aide services on behalf of a hospice only after that individual has successfully completed a competency evaluation program as described in this section. (1) The competency evaluation must address each of the subjects listed in paragraph (b)(3) of this section. Subject areas specified under paragraphs (b)(3)(i), (b)(3)(iii), (b)(3)(ix), (b)(3)(x) and (b)(3)(xi) of this section must be evaluated by observing an aide's performance of the task with a patient. The remaining subject areas may be evaluated through written examination, oral examination, or after observation of a hospice aide with a patient. This STANDARD is not met as evidenced by: Based on employee file review and interview, the hospice failed to ensure the hospice aide (HA) skills competency was completed prior to providing care to patients for 2 of 10 HA files reviewed with the potential to affect all the patients receiving HA services. (G and H) Findings include 1. Employee file G, date of hire (DOH) 2/21/13	S 615		

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S 615	Continued From page 3 and first patient contact 2/25/13, evidenced the aide skills competency was not performed until 4/1/13. 2. Employee file H, DOH 2/21/13 and first patient contact 3/4/13, evidenced the aide skills competency was not performed until 7/16/13. 3. On 10/7/13 at 12:40 PM, employee R indicated the hospice had piloted a program for the aides to carry around their sign off sheets for skills competencies, but the hospice did not receive them back, so new forms had to be created on the later dates. 4. The hospice's job description titled "Hospice Aide" dated 11/08 states, "Education ... Qualified as a Hospice Aide in the State per State and Federal Regulations."	S 615		
S 625	418.76(g)(1) HOSPICE AIDE ASSIGNMENTS AND DUTIES (1) Hospice aides are assigned to a specific patient by a registered nurse that is a member of the interdisciplinary group. Written patient care instructions for a hospice aide must be prepared by a registered nurse who is responsible for the supervision of a hospice aide as specified under paragraph (h) of this section. This STANDARD is not met as evidenced by: Based on clinical record review and interview, the hospice failed to ensure hospice aide care plans included only those tasks the aide was allowed to do and were updated to include new tasks for 2 of 5 records reviewed (#3 and 4) with the potential to affect all patients receiving aide services.	S 625		

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S 625	Continued From page 4 Findings include: 1. Clinical record #3 contained a narrative note dated 8/20/13 that indicated the nurse had placed a foley catheter. The Aide care plan reviewed 8/26/13 failed to include an update for the aide to provide external catheter care and measure catheter output. On 10/4/13 at 3:40 PM, employee Q indicated the hospice does not have a written policy for updating the aide care plans. 2. Clinical record #4 contained an Aide / Homemaker Care Plan dated 5/18/13 with instructions for Vital Signs (temperature, respiration, blood pressure, and pulse) every visit. A. The record failed to evidence the vital signs were taken as ordered on 5/29, 5/31, 6/5, 6/7, 6/12, 6/14, 6/19, 6/21, 6/26, 7/3, 7/5, 7/12, 7/19, and 7/24. B. On 10/7/13 at 10:40 AM, employee S indicated the aides do not obtain vital signs and this should not have been assigned to the aides.	S 625		
S 626	418.76(g)(2) HOSPICE AIDE ASSIGNMENTS AND DUTIES (2) A hospice aide provides services that are: (i) Ordered by the interdisciplinary group. (ii) Included in the plan of care. (iii) Permitted to be performed under State law by such hospice aide. (iv) Consistent with the hospice aide training.	S 626		

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S 626	Continued From page 5 This STANDARD is not met as evidenced by: Based on clinical record review and interview, the hospice failed to ensure the hospice aides (HA) followed the aide care plans as assigned for 3 of 5 (1, 4, and 5) clinical records reviewed with the potential to affect all the hospice's patients receiving HA services. Findings include 1. Clinical record #1 contained an Aide / Homemaker Care Plan dated 7/23/13 with instructions for mouth care to be performed at each visit. The record failed to evidence mouth care was provided on 7/25, 7/30, 8/1, 8/6, 8/8, 8/13, 8/15, 8/20, 8/22, 8/27, 8/29, 9/3, 9/5, 9/10, 9/12, 9/17, 9/19, and 9/24/13. On 10/4/13 at 1:40 PM, employee S indicated the aides are instructed to document refusal of care and notify the case managers. The case managers should update the aide care plans if changes are needed. 2. Clinical record #4 contained an Aide / Homemaker Care Plan dated 5/18/13 with instructions for tub bath or complete bed bath every visit and Vital Signs (temperature, respiration, blood pressure, and pulse) every visit. A. The record failed to evidence a tub bath or complete bed bath was provided 6/19, 6/26, 7/3, 7/5, 7/12, 7/17, 7/19, and 7/24/13. The HA progress notes failed to evidence a reason for not providing the bath. B. The record failed to evidence the vital signs were taken as ordered on 5/29, 5/31, 6/5, 6/7, 6/12, 6/14, 6/19, 6/21, 6/26, 7/3, 7/5, 7/12,	S 626		

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S 626	Continued From page 6 7/19, and 7/24. C. On 10/7/13 at 10:40 AM, employee S indicated the aides do not obtain vital signs and this should not have been assigned to the aides. 3. Clinical record #5 contained an Aide / Homemaker Care Plan dated 5/15/13 and reviewed 7/10/13 with instructions for mouth care every visit. The record failed to evidence mouth care was provided on 5/17, 22, 24, and 31; 6/5, 7, 12, 14, 19, 21, and 28; and 7/3/13.	S 626		